

CLAIRIDGE HOUSE

1519 60TH STREET

KENOSHA

53140

Phone: (262) 656-7500

Ownership:

Corporation

Operated from 1/1 To 12/31 Days of Operation: 366

Highest Level License:

Skilled

Operate in Conjunction with Hospital? No

Operate in Conjunction with CBRF? No

Number of Beds Set Up and Staffed (12/31/00): 65

Title 18 (Medicare) Certified? Yes

Total Licensed Bed Capacity (12/31/00): 93

Average Daily Census:

60

Number of Residents on 12/31/00: 62

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%
		Primary Diagnosis		Age Groups				
Home Health Care	No		%		%	Less Than 1 Year		29.0
Supp. Home Care-Personal Care	No					1 - 4 Years		35.5
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	24.2	More Than 4 Years		35.5
Day Services	No	Mental Illness (Org./Psy)	17.7	65 - 74	24.2			-----
Respite Care	No	Mental Illness (Other)	41.9	75 - 84	27.4			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	21.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	3.2	95 & Over	3.2	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.6		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.6		100.0	(12/31/00)		
Other Meals	No	Cardiovascular	6.5	65 & Over	75.8	-----		
Transportation	No	Cerebrovascular	6.5		-----	RNs		9.7
Referral Service	No	Diabetes	3.2	Sex	%	LPNs		12.5
Other Services	No	Respiratory	0.0		-----	Nursing Assistants		
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	17.7	Male	41.9	Aides & Orderlies		40.8
Provide Day Programming for Developmentally Disabled	No		100.0	Female	58.1			

					100.0			

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents	
	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem		Total
			Rate			Rate			Rate			Rate			Rate		
Int. Skilled Care	0	0.0	\$0.00	6	11.1	\$100.68	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	6	9.7%
Skilled Care	0	0.0	\$0.00	47	87.0	\$88.92	1	100.0	\$125.00	7	100.0	\$136.50	0	0.0	\$0.00	55	88.7%
Intermediate	---	---	---	1	1.9	\$74.21	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	1	1.6%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	0	0.0		54	100.0		1	100.0		7	100.0		0	0.0		62	100.0%

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing Assistance of	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	% Independent	One Or Two Staff		
Private Home/No Home Health	4.9	Daily Living (ADL)				
Private Home/With Home Health	2.4	Bathing	16.1	41.9	41.9	62
Other Nursing Homes	4.9	Dressing	27.4	33.9	38.7	62
Acute Care Hospitals	82.9	Transferring	48.4	22.6	29.0	62
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	45.2	22.6	32.3	62
Rehabilitation Hospitals	2.4	Eating	75.8	6.5	17.7	62
Other Locations	2.4	*****				
Total Number of Admissions	41	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter		11.3	Receiving Respiratory Care	8.1
Private Home/No Home Health	23.7	Occ/Freq. Incontinent of Bladder	43.5		Receiving Tracheostomy Care	4.8
Private Home/With Home Health	5.3	Occ/Freq. Incontinent of Bowel	46.8		Receiving Suctioning	4.8
Other Nursing Homes	15.8				Receiving Ostomy Care	0.0
Acute Care Hospitals	13.2	Mobility			Receiving Tube Feeding	9.7
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	38.7		Receiving Mechanically Altered Diets	29.0
Rehabilitation Hospitals	0.0					
Other Locations	10.5	Skin Care			Other Resident Characteristics	
Deaths	31.6	With Pressure Sores	11.3		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	0.0		Medications	
(Including Deaths)	38				Receiving Psychoactive Drugs	58.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	Proprietary			50-99		Skilled		Facilities	
	This Facility	Peer Group	Ratio	Peer Group	Ratio	Peer Group	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	64.5	82.5	0.78	87.3	0.74	84.1	0.77	84.5	0.76
Current Residents from In-County	64.5	83.3	0.77	80.3	0.80	83.5	0.77	77.5	0.83
Admissions from In-County, Still Residing	29.3	19.9	1.47	21.1	1.39	22.9	1.28	21.5	1.36
Admissions/Average Daily Census	68.3	170.1	0.40	141.8	0.48	134.3	0.51	124.3	0.55
Discharges/Average Daily Census	63.3	170.7	0.37	143.0	0.44	135.6	0.47	126.1	0.50
Discharges To Private Residence/Average Daily Census	18.3	70.8	0.26	59.4	0.31	53.6	0.34	49.9	0.37
Residents Receiving Skilled Care	98.4	91.2	1.08	88.3	1.11	90.1	1.09	83.3	1.18
Residents Aged 65 and Older	75.8	93.7	0.81	95.8	0.79	92.7	0.82	87.7	0.86
Title 19 (Medicaid) Funded Residents	87.1	62.6	1.39	57.8	1.51	63.5	1.37	69.0	1.26
Private Pay Funded Residents	11.3	24.4	0.46	33.2	0.34	27.0	0.42	22.6	0.50
Developmentally Disabled Residents	0.0	0.8	0.00	0.7	0.00	1.3	0.00	7.6	0.00
Mentally Ill Residents	59.7	30.6	1.95	32.6	1.83	37.3	1.60	33.3	1.79
General Medical Service Residents	17.7	19.9	0.89	19.2	0.92	19.2	0.92	18.4	0.96
Impaired ADL (Mean)	44.8	48.6	0.92	48.3	0.93	49.7	0.90	49.4	0.91
Psychological Problems	58.1	47.2	1.23	47.4	1.22	50.7	1.14	50.1	1.16
Nursing Care Required (Mean)	8.5	6.2	1.38	6.1	1.40	6.4	1.31	7.2	1.18